STATE OF SOUTH CAROLINA BUDGET AND CONTROL BOARD GSD / STATE FLEET MANAGEMENT

		405 ,	OIAIE I LLLI	MAINACHIE!	•		Page 1 of	pages.
Type of Vehicle			1022 SENATE : Columbia, S.C			Control # _		
Agency Num	ber Ag	ency Code		Agen	cy Name		Date Out (N	Mo-Da-Yr)
Tag Numbe	er	Sul	o Agency Name			Ending Miles	Date In (M	o-Da-Yr)
Driver	's Name (Last, First, Mic	ddle)		POLICY EAT BELTS		Starting Miles	Time Out Time In	
Driver's L	icense Number		Destination			Miles Used	Days Used	Inv Code
RECIPIENT	(signature)	VERIFIED B	Y (signature)	TURN	ED IN BY (signatu	ure) VE	RIFIED BY (sign	ature)
Date	Driver's Name	Odometer Beginning	Reading Ending	Tra From	vel To	Job Function F	erformed No. of	
		20gg	Litting	Tion	10			Pass.
		1				 		

Instruction on Back

Daily Trip Log

SFM FORM 11-03

continued				
Trip Log				
VEHICLE TAG NUMBER	YEAR	MONTH	AGENCY CODE	Page of pages.

Date	Driver's Name	Odomet	Odometer Reading Beginning Ending		Travel		No. of
		Beginning	Ending	From	Travel To	Job Function Performed	No. of Pass.
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This form to be used when all lines on DMVM Form 2-78 or DMVM 3-78 are filled.